

**Disability Commission 2001-2002**  
**Legislative Action Plan**  
**January 8, 2002**

*The Commission's 2002 Legislative actions are divided into the four (4) categories of business used by the Commission: I. On-going Community Initiatives, II. Transportation, III. Employment, and IV. Housing. Legislative actions listed below are preceded by a background reference found in meeting summaries for August 13, October 16, and November 26, 2001.*

**I. Legislative Priorities for On-Going Commission Initiatives**

- 1) **Background on Sign Language Interpreter Training:** VA Community College System provided budget needs for expansion of the program and its recently completed Task Force Report, which shows the rationale for this expansion and a ten (10) year plan (See November 26, 2001 meeting summary).

**Legislative Action:**

- ☐ **The Commission agreed that documented need existed to expand this program per Task Force recommendations; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (Attachment #1 - Task Force funding recommendations totaling \$1,365,000).**
- 2) **Background on ATLFA:** Commission expressed interest in taking advantage of opportunity to draw down significant federal resources for Assistive Technology (AT) for the Commonwealth made available through President Bush's New Freedom Initiatives and in building on the momentum in ATLFA in VA (ATLFA asked for Commission assistance in obtaining an appropriation of \$3 million over the biennium to use as 25% state match for available federal AT funds).

**Legislative Actions:**

- ☐ **The Commission agreed that documented federal grant opportunities existed at 1:4 ratio (state to federal dollars) to expand Virginia's Assistive Technology Loan Fund Authority; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent.**
- ☐ **The Commission agreed to endorse legislation patroned by Delegate Nixon (HHR DRS 2) to expand ATLFA's authority through a Code change to allow loans to assist individuals with disabilities to start up new businesses. (Attachment #2)**
- 3) **Background on CIT/DIT and Rehabilitation Joint Ventures:** On December 13, 2001 the Commission toured Woodrow Wilson Rehabilitation Center, focusing on the assistive technology laboratories. Jim Rothrock joined Commission members on the tour and discussed the need for an action plan to bring about a renewed, formal partnership among the Center For Innovative Technology (CIT), the Department of Information Technology (DIT) and rehabilitation agencies (Departments of Rehabilitative Services, Blind and Vision Impaired, Deaf & Hard-of-Hearing and Woodrow Wilson Rehabilitation Center) to strengthen

cooperation in advancing technology to respond to the talents and needs of persons with disabilities. Delegate Bloxom agreed and asked staff to collaborate with him in developing a draft resolution to be introduced.

**Legislative Action:**

- ☐ **The Commission elected to enter a resolution that Secretaries of Technology and Health and Human Resources, and representatives of technology industries, and the Commonwealth's rehabilitative agencies develop an action plan prescribing renewed, formal partnerships between CIT/DIT and Rehabilitation agencies. (Attachment #3).**
- 4) **Background on Developmental Disabilities (DD) Waiver needs:** The Commission learned of concerns with the DD waiver especially regarding the need for waiver provider development. DMAS described its success in receiving a three-year, \$1 million grant award in the Real Choice Systems Change Grant competition under President Bush's New Freedom Initiative. The DMAS report showed that some of the resources of the Real Choice grant will be used to improve provider development for support coordination and developing a statewide capacity for this service. In addition, DMAS reported that collaborative discussion is underway between the VBPD and DMAS on this topic. The DMAS also provided a written commitment to prioritize all children transitioning from the MR waiver to DD waiver services without lapses in services (Attachment #4).

Remaining DD waiver issues discussed concluded in the following Commission actions:

**Legislative Actions:**

- ☐ **It was agreed that a letter from the Chairman will be issued to the Secretary of Health and Human Resources and DMAS Director to ensure the rapid prioritize resources of the Real Choice grant, other DMAS resources, and collaboration opportunities with other agencies to provide in-depth provider development training for direct service providers and support coordinators. The Commission is determined that a statewide capacity for DD waiver support coordination be developed.**
- ☐ **The Commission will endorse pre-filed legislation patroned by Senator Bolling to develop an immediate licensing capacity for DD waiver providers.**
- ☐ **It was agreed that a letter from Chairman will be issued to the Commissioner of the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) to encourage the full support and sharing of DMHMRSAS Licensing resources in development of the new DD waiver provider licensing capacity within DRS and to avoid duplication of effort between agencies.**
- 5) **Background on the consumer concerns re: Virginia's administration of Medicaid waivers and Olmstead Compliance:** Consumers have directed the Commission's attention to the fact that the Medicaid 1915c Home and Community Based Services (HCBS) Waiver Program is a primary resource available to states to prevent and decrease dependence on nursing home and other institutions, and to provide individuals with supports to live as independently as possible within the community as required in the President's Executive Order on Olmstead compliance.

The Virginia Statewide Independent Living Council's CIRCLE Report, 2001 has been presented describing key legislative considerations and particular barriers which are reported to render the Virginia's HCBS less than responsive to consumers. The Joint Legislative Audit and Review Commission of the General Assembly has also issued a report entitled "Review of the Department of Medical Assistance Services" (JLARC, 2001) regarding one of the waivers that describes improvement recommendations.

#### **Legislative Actions:**

- ❑ **The Commission agreed to enter a resolution recommending that the Joint Legislative Audit and Review Commission, the Secretary of Health and Human Resources and the Department of Medical Assistance Services review and make recommendations to improve Virginia's Home and Community Based Waiver program policies and procedures and the Medicaid State Plan, to make them more responsive to consumers (Attachment #5 - Medicaid Home and Community-Based Waiver Improvement Resolution).**
- 6) **Background on need for qualified autism providers:** The Autism Program of VA (TAP-VA) gave new estimates for autism as 1 in 150 and stated that Virginia's current funding for services and provider infrastructure is not sufficient. TAP-VA recommended that higher education course work and perhaps, a certification program with an autism-specialty be developed. The Commission asked TAP to obtain comprehensive input from Universities/colleges, and programs throughout the state and return in January with a proposal (See October 16, 2001 and November 26, 2001 meeting summaries and autism budget proposal).

#### **Legislative Action:**

- ❑ **The Commission agreed that documented need existed to develop providers and expand higher education opportunities in the area of autism and that TAP-VA had done an outstanding job in developing a strong statewide consortium and consensus on needs and best practice solutions. However, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. They asked the group to keep working and re-present the proposal when the economy improves. They also agreed to issue a letter from the Chairman to the Secretaries of Health and Human Resources and Education to appoint agency representatives to the current Autism Planning Council to continue such planning (Attachment #6 - State Autism Planning Council and Training Program Summary).**
- 7) **Background on previous Commission budget proposals for the Governor's budget:** The Commission made funding recommendations to agencies for the Governor's budget development during the fall of 2001. Funds needed to manage waiting lists or other Commission recommendations are shown below. (See August 13, 2001 and October 16, 2001 meeting summaries).

**Legislative Actions (Based on Disability Commission Initiatives and Documented Need Matrix Attachment #7):**

- ☐ The Commission agreed that documented need existed to expand the Personal Assistance Services (PAS) Program and provide MEL per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$370,000 needed for waiting lists/\$250,000 and 1 MEL requested during the 2001 legislative session).
- ☐ The Commission agreed that documented need existed to expand the Consumer Services Fund per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$1,325,578 needed for waiting lists/\$400,000 requested during the 2001 legislative session).
- ☐ The Commission agreed that documented need existed to expand the Long Term Rehabilitation Case Management Program and provide MEL per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$150,000 and 2 MEL requested during the 2001 legislative session).
- ☐ The Commission agreed that documented need existed to expand the network of Centers for Independent Living per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$1,950,000 requested during the 2001 legislative session).
- ☐ The Commission agreed that documented need existed to expand services for persons with Traumatic Brain Injury per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$1,300,000 requested during the 2001 legislative session).
- ☐ The Commission agreed that documented need existed to expand employment services for persons with disabilities and support LTESS budget request per updated Matrix Report; however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$2,600,000 requested during the 2001 legislative session).
- ☐ It was agreed that a letter from the Chairman will be issued to the Secretary of Administration and the Department of General Services Director to reaffirm the need for immediate renovations to the Restrooms and Priority one areas of the State Capitol Building and the General Assembly Building to provide accessibility for persons with disabilities per the Capitol Square Access Study. The letter will suggest the use of the Governor's umbrella account for discretionary projects of high priority which can be used for "Necessary Repairs and Improvements to State Facilities"-Item C-150 in the Governor's Biennium Budget.
- ☐ The Commission agreed that documented need existed to provide the Disability Commission with state funded research consultation and staff support resources;

however, due to current deficits, they deferred expansion amendments to the next budget cycle through unanimous consent. (\$75,000 requested during the 2001 legislative session).

## **II. Legislative Priorities for Transportation**

- 8) **Background on Specialized Transportation Fund:** With the Specialized Transportation Council (STC) established, the Commission stated that the timing is right for expansion of the Specialized Transportation Fund (See October 16 meeting summary).

### **Legislative Action:**

- ☐ The Commission agreed to endorse a budget amendment to provide funding to the Transportation Incentive Fund to be administered through the Specialized Transportation Council. (\$800,000 recommended).
- 9) **Background on efforts to reduce transportation insurance costs for specialized transportation providers:** Delegate Van Landingham organized a work group made up of key parties interested in use of the Virginia Transit Liability Pool for transportation providers of persons with disabilities, as a way to reduce transportation insurance costs. Alternatives to the legislation were discussed and the group decided to attempt to finalize a mutually agreeable plan to reduce insurance costs for the providers through other options such as conversion to accessible mutual insurance, statutory accounting and/or Joint and Severable Liability (See October 16, 2001 and November 26, 2001 meeting summaries).

### **Legislative Action:**

- ☐ It was agreed that a letter from the Chairman will be issued to the Work Group members requesting a report to the Disability Commission in the Fall 2002 on the alternatives recommended by the group to finalize a mutually agreeable plan to reduce insurance costs for specialized transportation providers. (This letter shall be shared with the Specialized Transportation Council members).

## **III. Legislative Priorities for Employment**

- 10) **Background on a Medicaid Buy-in for working Virginians with disabilities:** The Commission agreed that a Medicaid Buy-in for working individuals with disabilities is needed within the Commonwealth. The Commission's Medicaid Buy-in Work Group described the detailed research that needs to be accomplished to develop a responsive, yet cost effective Buy-in. Lt. Governor Hager asked Delegate Mayer (with support from staff) to draft a Resolution to move the Buy-in forward at a good pace this year completing the needed planning and research and to prepare draft legislative and budgetary recommendations for the next legislative session. The Commission will seek to ensure continued Buy-in planning and development as a new Administration takes charge. Delegate Bloxom stated that draft legislation should be the goal task for the late fall 2002 (See November 26, 2002 meeting summary).

### **Legislative Action:**

- ☐ **The Commission elected to enter a resolution to advance Medicaid Buy-in development for Virginia with the goal of drafting initial legislative and budgetary recommendations before the 2003 Legislative Session (Attachment #10).**

- 11) **Background of the Buy-in as an economic and workforce advantage:** The Commission discussed the development of a campaign that will generate strong business interest in the economic advantages of a Medicaid Buy-in in Virginia. Dr. Ashley suggested that the Disability Commission in conjunction with the Business Leadership Network, and other appropriate entities, host a Spring Forum on the Economic and Workforce Opportunities of the Medicaid Buy-in.

### **Legislative Action:**

- ☐ **It was agreed that a letter from Chairman will be issued requesting that in conjunction with the Disability Commission and others, the Business Leadership Network and the Business Roundtable Forum jointly host a Spring Forum on the Economic and Workforce Opportunities of the Medicaid Buy-in. Lt. Governor Hager as Chair to the Business Roundtable and Lt. Governor Elect Kaine as upcoming Chair of the Disability Commission will act as Co-Chairman for the conference.**

## **IV. Legislative Priorities for Housing**

- 12) **Background on Maximizing Section 8 use and increasing accessible housing stock:** The Commission learned of numerous lost housing opportunities for Virginians with disabilities, especially related to the federal Section 8 Voucher programs and accessible housing construction. Data shows that only a small percentage of Virginia's public housing authorities (PHAs) apply for the Section 8 Vouchers specifically designed for persons with disabilities and VHDA reported that it is limited in its authority to require their participation. HUD informed the Commission that there is no way to force public housing authorities to apply for vouchers except through more education and incentives for communities to address the problem.

### **Legislative Action:**

- ☐ **The Commission elected to enter a resolution to bring about increased collaboration and interagency analysis, planning and training to improve housing opportunities especially related to the use of Section 8 vouchers for people with disabilities and accessible housing construction incentives. (Attachment #12; also note \$150,000 during the 2001 legislative session).**

**Attachment for #1**  
**Task Force funding recommendations totaling \$1,365,000**

Attachment for Priority #1

<b>VIRGINIA COMMUNITY COLLEGE SYSTEM</b> <b>AMERICAN SIGN LANGUAGE AND INTERPRETER EDUCATION</b> <b>Executive Summary</b>
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*There is a rapidly increasing demand for ASL&IE courses and a critical need for sign language interpreters in the nation and in the Commonwealth of Virginia. By 2008 the statewide demand for Deaf Interpreters will increase by 24% (see attachment A).*

- ❖ Hire a full time statewide coordinator for the ASL&IE initiative. \$80,000.
  - Coordinate the "VCCS ASL&IE Presents....." series.
  - Assume responsibility for continuing the development of AAS programs statewide.
  - Coordinate the articulation of AAS degree programs with state senior institutions.
  - Coordinate, with senior institutions, the development of ongoing faculty career tract.
  - Coordinate on-line statewide development and delivery, through compressed video and/or the Web), of ASL&IE program.
  
- ❖ Continue efforts to establish associate degree programs in ASL&IE at five selected community colleges. \$1,100,000.
  - Fund one ASL faculty position and one additional ASL faculty position for each of five participating community colleges. \$600,000.
  - Fund purchase of ASL software. \$125,000.
  - Fund technology development for on-line delivery of courses. \$300,000.
  - Provide for ASL student scholarships at each participating institution. \$50,000.
  - Finance an ASL marketing campaign for each participating institution. \$25,000.
  
- ❖ Continue to provide professional development opportunities for ASL&IE instructors. \$185,000.00
  - Fund the continuation of the "VCCS ASL&IE Presents....." series.

**Attachment for #2**  
**Assistive Technology Loan Fund Authority (ATLFA)**  
**Need for Proposed Legislation**

Description: Amend the Code, §51.5-53, §51.5-59, for the Assistive Technology Loan Fund Authority (ATLFA) to allow that loans be made available to people with disabilities for entrepreneurial purposes. This will allow the ATLFA to make micro-loans to people with disabilities seeking to establish a new business.

Background: The Assistive Technology Loan Fund Authority (ATLFA) was established to provide low-cost loans to Virginians with disabilities in order to purchase specialized equipment and technology. Loans are available for making homes more accessible, purchasing equipment and technology and for the purchase and modification of vehicles. The ATLFA, in conjunction with a banking partner, makes loans with longer terms and lower interest rates to people with disabilities, and their family members. Loans that the bank approves are made without a guarantee; all applications that are turned down by the bank are reviewed by the ATLFA for a possible guarantee. Since an agreement was signed with SunTrust Bank in April 1999, over \$2 million in low-interest loans have been made to people with disabilities. Of that figure, only 40% have required a guarantee. This has become a very effective private-public partnership benefiting many Virginian families.

Objectives/purpose: The Department of Rehabilitative Services and the ATLFA have received federal grant funding which will allow the expansion of the existing program to include assisting individuals with disabilities start up new businesses. A Code change is needed to broaden the scope of the ATLFA to allow loans for this purpose.

**Department of Rehabilitative Services**  
**2002 Session of the General Assembly**

**Proposal Identifier Number HHR DRS 2**  
**Draft Legislation**

**§ 51.5-53. Definitions.**

As used in this chapter, unless the context clearly requires a different meaning:

"Assistive technology" means any item, piece of equipment or device that enables an individual with a disability to improve his or her independence and quality of life.

"Authority" means the Assistive Technology Loan Fund Authority established pursuant to this chapter.

*"Board" means the Board of Directors of the Assistive Technology Loan Fund Authority.*

"Fund" means the Assistive Technology Loan Fund established pursuant to this chapter.

"Qualifying borrower" means any person who demonstrates that a loan made pursuant to this chapter will assist one or more persons with disabilities to improve their independence or become more productive members of the community. The person must demonstrate creditworthiness and repayment abilities to the satisfaction of the Board.

**§ 51.5-54. Declaration of purpose; Assistive Technology Loan Fund Authority established.**

A. It is hereby found and determined by the General Assembly that there exists in the Commonwealth a need to provide assistance in the purchase of assistive technology equipment, [other equipment, or](#)

[other loans](#) which is designed to enable persons with disabilities to become more independent or more productive members of the community with an improved quality of life.

B. To achieve the objectives of subsection A, the Assistive Technology Loan Fund Authority is hereby created, with such powers and duties as are set forth in this chapter, as a public body corporate and as a political subdivision of the Commonwealth.

#### **§ 51.5-55. Membership of Board; terms, compensation, and expenses.**

A. All powers, rights and duties conferred by this chapter or other provisions of law upon the Authority shall be exercised by the Board of Directors of the Authority. The Board shall consist of twelve members as follows: the Secretary of Health and Human Resources or his designee; an employee of the Woodrow Wilson Rehabilitation Center; an experienced consumer lender; a certified public accountant; two persons with investment finance experience; and six persons with a range of disabilities. The citizen members shall be appointed by the Governor and confirmed by the General Assembly. The Board shall annually elect a chairman from among its members. Board members shall receive no salaries but shall be reimbursed for all reasonable and necessary expenses incurred by them in the performance of their duties on behalf of the Authority.

B. The ten citizen members of the Board shall be appointed for four-year terms, except that appointments to fill vacancies shall be made for the unexpired terms. Representatives of state agencies shall serve coincident with the term of the Governor. No member appointed by the Governor shall be eligible to serve more than two complete terms in succession.

C. *Meetings of the members of the Board shall be held at the call of the chairman or whenever six members so request. The Board [may delegate to a Loan Committee the authority ~~shall meet regularly~~ to review ~~and approve or deny individual~~ loan applications ~~and approve or deny such applications~~ based upon information provided to or obtained by the Board, in accordance with criteria established by the Board and subject to the Board's ratification at its next regular meeting.](#) In any event, the Board shall meet as necessary to attend to the business of the Authority.*

#### **§ 51.5-56. Powers of the Authority.**

The Authority is hereby granted all powers necessary or appropriate to carry out and effectuate its purposes including, but not limited to, the following powers to:

1. Have perpetual existence as a public body corporate and as a political subdivision of the Commonwealth;
2. Adopt, amend, and repeal bylaws, rules and regulations not inconsistent with this chapter, to regulate its affairs and to carry into effect the powers and the purposes of the Authority and for the conduct of its business. All regulations of the Authority shall be promulgated in accordance with the Administrative Process Act (§ [2.2-4000](#) et seq.);
3. Sue and be sued in its name;
4. Have an official seal and alter it at will;
5. Establish, administer, manage, including the creation of reserves, and make expenditures from the Fund for the sole purpose of providing loans to individuals with disabilities for the acquisition of assistive technology, [other equipment, or other loans](#);
6. Administer the Fund established by this chapter and contract with the State Treasurer and other state or community-based entities or groups working with persons with disabilities for such assistance in administering the loan program as the Board may require;
7. Maintain an office at such place or places within the Commonwealth as it may designate;
8. Make and execute contracts and all other instruments necessary and convenient for the performance of its duties and the exercise of its powers under this chapter upon such terms and conditions as it

deems appropriate, including contracts with appropriate state or community-based entities or groups dealing with disabled persons;

9. Employ office personnel, advisers, consultants, professionals and agents as may be necessary in its judgment, and to fix their compensation. Legal services in civil matters shall be rendered and performed by the Attorney General in accordance with Chapter 5 (§ [2.2-500](#) et seq.) of Title 2.2, and special counsel may only be employed with approval and appointment by the Attorney General or as may otherwise be authorized by § [2.2-510](#);

10. Procure insurance against any loss in connection with its property and other assets, including, but not limited to, loans in such amounts and from such insurers as it may deem advisable;

11. Receive, hold, accept, and administer from any source gifts, grants, aid or contributions of money, property, labor or other things of value to be held, used and applied to carry out the purposes of this chapter (subject, however, to any conditions upon which grants or contributions are made) including, but not limited to, gifts, grants, bequests of money or devises from any source, including the federal government or any of its agencies or instrumentalities for the purposes of this chapter. Unless otherwise restricted by the terms of the gift or bequest, the Board is authorized to sell, exchange, or otherwise dispose of such money, securities, or other property given or bequeathed to it in furtherance of its purposes;

12. Use any fund or funds of the Authority for any and all expenses to be paid by the Authority including, by way of example, but not by limitation, any and all expenses for administrative, legal, and other services;

13. Collect fees and charges, as the Authority determines to be reasonable, in connection with its loans, insurance, guarantees, commitments and servicing thereof;

14. Take any action necessary or convenient for the exercise of the powers granted by this chapter or reasonably implied from them; and

15. Maintain the confidentiality of financial, medical, rehabilitative and other personal information submitted to or maintained by the Authority concerning applicants for or recipients of loan funds. Such information shall not be subject to the mandatory disclosure provisions of § [2.2-3704](#) or the public meeting requirements of § [2.2-3711](#) of the Virginia Freedom of Information Act. (1995, c. 812.)

#### **§ 51.5-57. Assistive Technology Loan Fund established.**

A. There is hereby established a permanent and perpetual fund to be known as the Assistive Technology Loan Fund, consisting of such moneys as may be appropriated by the General Assembly from time to time, gifts, bequests, endowments or grants from the United States government, its agencies and instrumentalities, all receipts by the Fund from loans made by it, all income from the investment of moneys held in the Fund, and any other available sources of funds, public and private. Any moneys remaining in the Fund at the end of a biennium shall not revert to the general fund but shall remain in the Fund. Interest and income earned from the investment of such funds shall remain in the Fund and be credited to it.

B. The Fund shall be used to provide loans to individuals with disabilities within the Commonwealth for the purpose of acquiring assistive technology, [other equipment, or other loans](#) designed to help such individuals become more independent. The Fund shall also be used to buy down interest rates of lending institutions making such loans and provide a loan guarantee for loans made by lending institutions for such purposes. The Fund shall be used only when, in the discretion of the Board, loan applicants have met eligibility criteria and the release of money is deemed appropriate.

C. The Fund shall be administered and managed by the Authority. The costs and expenses of maintaining, servicing and administering the Fund may be paid out of amounts in the Fund.

**§ 51.5-58. Provision of loans.**

A. The Board may enter into loan agreements with any qualifying borrower who demonstrates (i) that the loan will be used to acquire assistive technology, [other equipment, or other loans](#) designed to help one or more persons with disabilities to improve their independence or become more productive members of the community and (ii) who has the ability to repay the loan.

B. The amount and terms of any loan shall be determined by the Board.

C. All loans must be repaid on such terms and at such interest rates as the Board may, from time to time, determine to be appropriate in accordance with a procedure prescribed by regulations adopted pursuant to the Administrative Process Act (§ [2.2-4000](#) et seq.).

**§ 51.5-59. Annual report.**

The Board shall submit an annual statement of the receipts, disbursements, and current investments of the Fund for the preceding year to the Governor and the General Assembly. The report shall set forth a complete operating and financial statement covering the operation of the Fund during the year.

**Attachment for #3**  
**Resolution prescribing renewed, formal partnerships among**  
**CIT/DIT and Rehabilitation agencies**

**Resolution on Joint Ventures in Technology and Rehabilitation**

**Directing the Secretaries of Technology, Health and Human Resources, and representatives of technology industries to develop an action plan prescribing renewed partnerships among the Center For Innovative Technology (CIT), the Department of Information Technology (DIT) and rehabilitation agencies (Departments of Rehabilitative Services, Blind and Vision Impaired, and Deaf & Hard-of-Hearing and Woodrow Wilson Rehabilitation Center) to strengthen cooperation in advancing research and new technology to respond to the talents and needs of persons with disabilities, and to provide a report to the Disability Commission including past achievements, current initiatives and future opportunities for collaboration prior to the 2003 General Assembly session.**

Patron: Bloxom

WHEREAS, in previous years, CIT/DIT and Health and Human Resources agencies worked collaboratively to explore mutual opportunities for technology development and application and made recommendations for implementing the assistive technology opportunities into the CIT targeting strategy for developmental research; and

WHEREAS, CIT/DIT made significant strides in identifying assistive technology adaptations among the Commonwealth's inventory of technology projects and sought to apply that information to assist Virginians with disabilities; and

WHEREAS, the previous partnership allowed rehabilitation agencies to act as resources for product developers and laboratories for field testing of technology; and

WHEREAS, new technological advances demand a renewed, intensified partnership between rehabilitative engineers/specialists and CIT/DIT representatives for the purpose of applied research on technology development, transfer, and potential commercial values of such devices and field testing opportunities with highly motivated users, Virginians with disabilities; and

WHEREAS, this new partnerships should also include joint ventures through collaborative grant proposals, potential research endeavors, and public awareness collaborative ventures; and

WHEREAS, CIT/DIT shall work specifically with rehabilitative agencies to encourage high technology companies in Virginia to consider adapting select technologies into assistive technology devices to expand the gifts, talents, and productivity of persons with disabilities interested persons with disabilities; and be it

RESOLVED by the House of Delegates, the Senate concurring, That the General Assembly commend CIT/DIT for its previous and current efforts in furthering and disseminating technological advances that have improved the productivity and quality of life for all Virginians; and

RESOLVED FURTHER, That in light of recent technological advances, Secretaries of Technology, Health and Human Resources, and representatives of technology industries, shall develop an action plan prescribing renewed formal partnerships among Center For Innovative Technology (CIT), Department of Information Technology (DIT) and rehabilitation agencies to strengthen cooperation in advancing research and new technology to respond to the talents and needs of persons with disabilities, and to provide a report on the plan development to the Disability Commission prior to the 2003 General Assembly session including past achievements, current initiatives and future opportunities for collaboration.

**Attachment for #4**  
**Transition of Children from the MR to DD Waiver**

**TRANSITION OF CHILDREN FROM THE MR TO DD WAIVER**

**Provided by Diana Thorpe, DMAS**

**January 4, 2002**

The Governor's Budget includes language addressing the transition of children from the Mental Retardation (MR) Waiver to the Developmental Disabilities (DD) Waiver.

The budget item reads as follows:

"The Department of Medical Assistance Services shall provide for the transfer from the Mental Retardation Waiver to the Individual and Family Developmental Disabilities Support Waiver for children who reach age 6, are receiving services under the Mental Retardation Waiver, and who have been determined not to have a diagnosis of mental retardation. Contingent upon approval of these changes by the Centers for Medicare and Medicaid Services, the Department shall promulgate emergency regulations to become effective within 280 days or less from the enactment date of this act. The Department shall implement these necessary changes to be consistent with federal approval of the waiver changes."

**Attachment for #5**  
**Medicaid Home and Community–Based Waiver Improvement Resolution**

**Recommending that Joint Legislative Audit and Review Commission, Secretary of Health and Human Resources and the Department of Medical Assistance Services review and make recommendations to improve Virginia’s Home and Community Based Services (HCBS) Waiver program policies, manuals, procedures and regulations, and the Virginia Medicaid State Plan, to make them more responsive to consumers by utilizing external, expert input from other effective state programs, the Virginia Statewide Independent Living Council’s CIRCLE Report 2001, and the Joint Legislative Audit and Review Commission (JLARC) interim report entitled “Review of the Department of Medical Assistance Services (JLARC, 2001) and present such recommendations to the Disability Commission by November 30, 2002.**

***Patron: Puller***

*WHEREAS, the Commonwealth of Virginia in accordance with the federal New Freedom Initiative is committed to developing supports for people with significant disabilities to prevent and decrease dependence on nursing home and other institutions, and to provide individuals with supports to live as independently as possible within their own home or their choice of community residential settings; and*

WHEREAS, recognizing that under the federal Social Security Act, the Medicaid §1915(c) Home and Community Based Services (HCBS) Waiver Program is a primary resource available to states for such services; and

WHEREAS, the U.S. Supreme Court’s decision under *Olmstead v. L.C.* affirms the right to provision of Medicaid funded services in the most integrated settings; and,

WHEREAS, hundreds of Virginians are now on waiting lists for services, or are adversely constrained by service limit “caps” or are receiving inadequate services which put them at risk for nursing home or other institutional placements; and

WHEREAS, the Virginia Statewide Independent Living Council (SILC), which engaged a work group of key stakeholders including consumer analysts from all regions of the Commonwealth and included a legal analysis conducted by the attorney involved with the judicial precedent for the *Olmstead* decision, has completed an extensive report entitled “Creating and Implementing Responsiveness in Community Living to Endependence” (CIRCLE, 2001), has provided an in-depth review of laws, regulations, policies and procedures related to HCB services in Virginia; and

WHEREAS, CIRCLE 2001 identified model policies and practices employed by other states, including additions to, or revisions of Medicaid State Plans that promote independence, self-sufficiency and consumer-directed, consumer choice consistent with the Supreme Court’s *Olmstead* decision and the federal New Freedom Initiative, and

WHEREAS, Virginia Statewide Independent Living Council’s CIRCLE Report, 2001 described key legislative considerations and particular barriers which render the Virginia’s HCBS program less than responsive to consumers, particularly in areas where Virginia is not using the federal latitude made available within its HCBS waiver program, and provided manageable recommendations for Medicaid systems change that could address these HCBS programmatic and policy issues in Virginia; and

WHEREAS, pursuant to SJR 441 (2001), the Joint Legislative Audit and Review Commission of the General Assembly has also issued an interim report entitled “Review of the Department of Medical Assistance Services (JLARC, 2001) and found that in at least one of the State’s Medicaid Waiver programs, numerous communication and administrative barriers exist, the waiver management is contrary to legislative intent and the number of available program “slots” was found to be inadequate; and

WHEREAS, JLARC recommends that DMAS provide a status report to the General Assembly on several programs and describe how it has implemented the JLARC recommendations prior to the 2003 session; and therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Legislative Audit and Review Commission, the Secretary of Health and Human Resources and the Department of Medical Assistance Services shall review and make recommendations to improve Virginia's Home and Community Based Waiver program policies, manuals, procedures and regulations, and the state Medicaid Plan, to make them more responsive to consumers needs by utilizing external, expert input from other effective state programs, the Virginia Statewide Independent Living Council's CIRCLE Report 2001, and the Joint Legislative Audit and Review Commission (JLARC) interim report entitled "Review of the Department of Medical Assistance Services (JLARC, 2001) and present such recommendations to the Disability Commission by November -30, 2002.

RESOLVED FURTHER, That Secretary of Health and Human Resources and the Department of Medical Assistance Services articulate a mission for Virginia's Medicaid program and any waiver program revision or consumer-directed enhancements that reflects independent living values enunciated in the CIRCLE, 2001 Vision Statement and the New Freedom Initiative as articulated recently by President Bush.

**Attachment #6**  
**State Autism Planning Council and Training Program Summary**

**Final Follow-up Report for Disability Commission**  
***The Autism Program of VA (TAP-VA)***  
**January 8, 2002**

At the request of the Disability Commission, TAP-VA organized a statewide work group to meet on December 20, 2001 at Virginia Union University to outline a proposal specifically focused on improving and expanding personnel training and education on services/supports in autism and other related developmental disabilities. The two primary autism community programs in the Commonwealth were represented (i.e., the Virginia Autism Resource Center (VARC) and The Autism Program of VA (TAP-VA), as well as representatives from colleges and universities throughout the State committed to furthering higher education in autism and other related developmental disabilities. Representatives from the Virginia Board for People with Disabilities and staff to the Disability Commission were also present (See work group below).

With extensive collaboration before, during, and after the meeting, the Group has outlined the attached proposal in the form of a budget appropriation for the convenience of the Commission. The proposal establishes an on-going State Autism Services Planning Council and a systematic approach to develop formal recommendations for an Intra-State Training and Certification of personnel qualified to support persons with autism and related developmental disabilities and their families.

If approved, Council members shall be appointed from the work group below and other representatives will be sought to include colleges/universities and expert community providers from all regions of the state and appropriate state agencies. The current participating work group that collaborated on this document includes:

Leigh Butler, PhD, Director, Teacher Education Services, Old Dominion University  
Jane Carlson, PhD, Director, Autism Center of Virginia (ACV), Department of Psychiatry, Virginia Commonwealth University  
Robert Cohen, PhD, Director, Commonwealth Institute for Child & Family Studies, VCU  
Mark Diorio, PhD, Director, Northern Virginia Training Center  
Elin Doval, Parent Advocate, Virginia Autism Resource Center & board member, Virginia Board for People with Disabilities.  
Erika Drescher, Director, Virginia Institute of Autism, associated with University of Virginia  
*William F. Johnson, Coordinator of Exceptional Education, School of Education and Interdisciplinary Studies, Virginia Union University*  
Patty Hawkins, PhD, Director, Southeastern Cooperative Educational Programs (SECEP), Norfolk, VA  
Janet W. Hill, Research Consultant to Disability Commission, Department of Psychiatry, VCU  
Theodore Hoch, EdD, Director of Psychology, Northern VA Training Center and Assistant Professor George Mason University  
Jane Kroboth, Parent advocate and Acting Director, The Autism Program of Virginia (TAP-VA)  
Miriam Liss, PhD, Associate Professor of Psychology, Mary Washington College  
Carol Morris, PhD, Chair, Department of Special Education, Norfolk State University  
Fred Orelove, PhD, Director, Virginia Institute on Developmental Disabilities (VIDD), VCU  
Donald Oswald, PhD, Virginia Treatment Center for Children, VCU/MCV  
Johannes Rojahn, PhD., Center for Cognitive Development, Department of Psychology, George Mason University  
Carol Schall, Director, VA Autism Resource Center, and associated with Grafton School  
Marti Snell, PhD, Professor, Special Education, Department of Curriculum, Instruction and Special Education, Curry School of Education, University of Virginia  
Rick Turner, Parent and Chair, Board of Directors, The Autism Program of Virginia (TAP-VA)  
Noel Woolard, M.Ed, Program Director, The Autism Program of Virginia (TAP-VA)  
Susan Yamamoto, Outreach Program Coordinator, Graduate School of Education, George Mason University

## **Proposal to Establish an On-going State Autism Services Planning Council**

This proposal requests that the General Assembly of Virginia establish an on-going State Autism Services Planning Council to be organized and managed by a partnership between the two primary, General Assembly-developed autism concerns for the Commonwealth, the Virginia Autism Resource Center (VARC) and The Autism Program of VA. (TAP-VA). The Council will also include representatives from other existing community resource programs with expertise in autism and related developmental disabilities, colleges and universities throughout the State committed to furthering higher education in autism and other related developmental disabilities, Virginia Board for People with Disabilities, Department of Medical Assistance Services, Department of Education, Department of Rehabilitative Services, the Department of Mental Health, Mental Retardation and Substance Abuse Services, Disability Services Boards, Centers for Independent Living, Community Services Boards, and persons with autism and their families. The Virginia Autism Resource Center (VARC) and The Autism Program of VA (TAP-VA) will appoint co-chairs and staff for the Council and will administer the funds. The council shall be given the following specific charges:

1. Review available personnel and training needs assessment data from recent studies and analyses (i.e., HJR 228/528 related to school age needs and DMAS data related to DD and MR Medicaid waiver needs for children and adults with autism and other related developmental disabilities).
2. Identify personnel roles for paraprofessionals and professionals needed to meet the support needs of Virginians with autism and other related developmental disabilities and their families in culturally appropriate ways and the multiple levels of expertise required for these roles within schools and community systems (especially the DD and MR Medicaid waiver).
3. Identify and outline competencies for typical roles and the multiple levels of expertise needed for those roles.
4. Identify the evidence-based information and instructional methods needed to teach individuals with autism and the collaborative teaming approaches that enable appropriate service-delivery and support for individuals with autism and are culturally sensitive to the diversity within the Commonwealth.
5. Outline the evidence-based personnel preparation models and methods deemed most promising for the Commonwealth's approach to autism and other related developmental disabilities.
6. Identify and review all currently available community/facility-based training and college level course work specific to autism and other related developmental disabilities in all regions of the state.
7. Begin systematic process to coordinate and expand existing Virginia autism-related training and course work into a comprehensive curriculum process that is culturally sensitive and will build all needed levels of personnel for this population including direct service workers, community/employment and residential supporters, service coordinators, teachers' aides, teachers, psychologists, behavioral consultants, supervising psychologists, direct and supervising levels of Certified Applied Behavior Analysts.
8. Monitor use of appropriated funds to: 1) establish student stipends for currently existing, but under-utilized autism-related training and course work; and 2) support statewide multi-college/university collaboration and infrastructure development to advance coordinated personnel preparation in autism and other related developmental disabilities for Virginia.
9. Develop formal recommendations for Intra-state Training and Certification of personnel qualified to support persons with autism and related developmental disabilities and their families including (i) recommendations on training: roles, competencies, rates of reimbursement, etc.; (ii) recommendations for culturally diverse provider development: incentives, ethics, best practices,

overlap qualifications with other specialty services; and (iii) recommendations on outcome monitoring and quality assurance; and (iv) an outcome accountability system for this appropriation.

10. This amendment includes \$150,000 from the general fund for the first year (FY 2003) for three purposes: 1) state planning council organization coordination activities and report/draft curriculum development (15%), 2) to support student stipends to invite student interest in autism-related training and higher education programs\* (55%), and 3) to support multi-college/university collaboration and infrastructure development to advance coordinated personnel preparation in autism for Virginia (30%). This amendment also includes \$150,000 for the second year (FY 2004) to be used in the purposes listed above in identical proportions.

\*Proactive steps shall be taken to direct stipend opportunities to students from culturally diverse backgrounds.

11. Prepare an annual report to the Governor, the Disability Commission, and the General Assembly on progress made and legislative actions required.

Explanation:

This amendment allows the General Assembly to establish an on-going State Autism Services Planning Council to be organized and managed by a partnership between the two primary, General Assembly-developed autism concerns for the Commonwealth, the Virginia Autism Resource Center (VARC) and The Autism Program of VA. (TAP-VA). The purpose of the Council will be specifically focused on improving and expanding personnel training and education on services/supports in autism and other related developmental disabilities.

<b>Va. Commonwealth University</b>	<b>Year 1</b>	<b>Year II</b>
<b>(Medical College of VA/Department of Psychiatry)</b>	<b>\$150,000</b>	<b>\$150,000 GF</b>
<b>(Fiscal Agent for VARC and TAP-VA)</b>		

**Attachment for #7**

**See separate document labeled “Disability Commission Initiatives and Documented Need Information - July 27, 2001 – DRS Matrix”**

**Attachments for #8 and #9 - No attachments**

**Attachment for #10**

**Resolution on a Medicaid Buy-In for Working Virginians with Disabilities**

**Requesting DMAS with the assistance of DRS and DRVD proceed with development of Medicaid Buy-In Opportunity Supporting Working Virginians with Disabilities**

Patron: Bloxom

WHEREAS the Department of Medical Assistance Services has recently been awarded a Medicaid Infrastructure grant from the Centers for Medicare and Medicaid Services for \$2,000,000 (\$500,000 over the next four years) to provide resources to the Commonwealth to identify the barriers to employment for individuals with disabilities; and

WHEREAS, health care is important to all Americans, but particularly so to individuals with disabilities who have special health care needs who often cannot afford insurance available to them through the private market, are uninsurable by the plans available in the private sector, and are at risk of incurring high and economically devastating health care costs; and

WHEREAS, health care services, allow Americans with significant disabilities to live independently and rejoin the workforce; and

WHEREAS, coverage for many of these services, as well as for prescription drugs and durable medical equipment, enables persons with disabilities to obtain and retain employment; and

WHEREAS, the fear of losing health care and related services is one of the greatest barriers keeping individuals with disabilities from maximizing their employment, earning potential, and independence; and

WHEREAS, despite the many opportunities for employment made possible by the Americans with Disabilities Act and innovations in technology, medical treatment, and rehabilitation, fewer than one-half of one percent of Social Security Disability Insurance and Supplemental Security Income beneficiaries leave the disability rolls and return to work; and

WHEREAS, Congress enacted the “Ticket to Work and Work Incentives Improvement Act of 1999” to amend the Social Security Act to, among other things, expand the availability of health care coverage for working individuals with disabilities and to provide such individuals with meaningful opportunities to work; and

WHEREAS, the purposes of the Act are to (i) provide health care and employment preparation and placement services to individuals with disabilities that will enable those individuals to reduce their dependency on cash benefit programs; (ii) encourage states to adopt the option of allowing individuals with disabilities to purchase Medicaid coverage that is necessary to enable such individuals to maintain employment; (iii) provide individuals with disabilities the option of maintaining Medicare coverage while working; and (iv) establish a return to work ticket program that will allow individuals with disabilities to seek the services necessary to obtain and retain employment and reduce their dependency; and

WHEREAS, in order to evaluate the feasibility of implementation of a Medicaid Buy-In program that supports working persons with disabilities in the Commonwealth, it is imperative that certain research be conducted to survey potential recipients, educate stakeholders, and assess employment barriers, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Department of Medical Assistance Services, serving as the lead agency in collaboration with the Departments of Rehabilitative Services and Rights of Virginians with Disabilities and with the participation of the Department of the Blind and Vision Impaired, the Department of Mental Health/Mental Retardation and Substance Abuse Services, the Department of Deaf and Hard of Hearing, Virginia Board for People with Disabilities, and with an advisory committee of consumers, advocates and stakeholders, shall, with all due hast, utilize the Medicaid Infrastructure grant to identify the steps needed to implement an effective Medicaid Buy-in program for Virginia, with the goal of utilizing these data to develop initial legislation and budgetary recommendations that will be necessary to implement the Buy-in. The Departments shall develop their recommendations to the Governor and the Commission by December 1, 2002 in advance of the Commission's December 2002 meeting on the topic.

In conducting the study, the Medicaid Infrastructure grant shall be used to survey potential populations, delineate financing for the program, and assess the cost effectiveness, availability of funding, and economic benefits, in order to make recommendations as to the effective implementation of a Medicaid Buy-In program for the Commonwealth under the federal "Ticket to Work and Work Incentives Improvement Act of 1999." The Departments, in the study, shall solicit input from stakeholders, disability advocates, business employers, and others deemed to have valuable information for the benefit of this study, including a Business Leadership Forum with the purpose of unveiling the Buy-in as an economic and workforce opportunity for business.

**Attachment for #11 - No attachment**

**Attachment for #12**  
**Resolution on Specialized Housing for Persons with Disabilities**

**Recommending that the Virginia Disability Commission identify improved housing opportunities for citizens with disabilities as its top priority for 2002-2003 session and that it facilitate collaboration among stakeholders to develop recommendations for strengthening intergovernmental and interagency coordination of housing programs for people with disabilities and a presentation to the Commission by December 1, 2002.**

**Patrons: Bloxom**

WHEREAS, the lack of affordable and accessible housing remains a major barrier to community living and full participation in community life for many persons with disabilities; and

WHEREAS, individual efforts of the Disability Commission, Virginia Housing Development Authority and others have identified the need for strengthened intergovernmental and interagency coordination for improved housing opportunities for persons with disabilities; and

WHEREAS, the Disability Commission has engaged a work group of key stakeholders including representatives of Virginia Housing Development Authority, Department of Rehabilitative Services, Virginia Board for People with Disabilities, Department of Mental Health, Mental Retardation and Substance Abuse Services, Centers for Independent Living, persons with disabilities, nonprofit housing providers, and local redevelopment and housing authorities; and

WHEREAS, in the Disability Commission's review of housing, numerous lost opportunities for affordable housing for persons with disabilities were documented related to the federal Section 8 Voucher programs; and

WHEREAS, the Commission found that on a national basis, only 10% of public housing authorities (PHAs) applied for the Section 8 Vouchers specifically designed for persons with disabilities over the last four years and that while statistics for Virginia were better (28% of all PHAs), they were still disappointing, given the long Section 8 waiting lists that exist for people with disabilities in the Commonwealth; and

WHEREAS, the Commission has also found that accessible housing production has in no way kept pace with identified need and that the Commonwealth's housing policies could be modified to provide incentives for greater production of accessible housing production; and

WHEREAS, national housing consultation has provided to the Disability Commission with action recommendations to improve access and use of Section 8 vouchers and other federal opportunities specifically designed for persons with disabilities and the production of accessible housing stock; and

WHEREAS, housing assistance agencies have also reported a marked communication gap between state/local housing authorities and the disability community; and

WHEREAS, these findings were also documented in the 2001 JLARC study, House Document No. 02, entitled Review of the Virginia Housing Development Authority and the 2000 study completed by

VHDA, DHCD, and DMHMRSAS, entitled Funding for Housing Serving People with Disabilities - Final Report on SJR 159 and SJR 456; and be it, therefore

RESOLVED by the House of Delegates, the Senate concurring, That the Disability Commission has determined that improving housing opportunities for persons with disabilities shall be the top priority of its 2002 work session prior to the 2003 General Assembly session and a collaborative action plan to improve housing opportunities for persons with disabilities will be established; and

RESOLVED FURTHER that the Disability Commission housing work group will be expanded to include representatives from the Housing Study Commission, Department of Housing and Community Development, Rural Development Office/Department of Agriculture, Richmond HUD Office, Northern Virginia HUD office (located in the District of Columbia), VA Association of Housing and Community Development Officials (VaHCDO), Association of Public Housing Agency Directors, Disability Services Board Council, Community Services Boards, Veterans Administration, as well as the current group including Virginia Housing Development Authority, Department of Rehabilitative Services, Virginia Board for People with Disabilities, Department of Mental Health, Mental Retardation and Substance Abuse Services, Centers for Independent Living, nonprofit housing providers, and local redevelopment and housing authorities and other key housing stakeholders, advocates, and consumers; and

RESOLVED FURTHER, the Commission and the work group will develop a Housing Action Plan that (i) identifies the mission, composition, responsibilities and funding for an intergovernmental, interagency coordinating body on housing and disability issues and (ii) identifies actionable strategies for the maximizing use of Section 8 programs and other federal housing and housing production programs for individuals with disabilities in Virginia. The action plan shall explore the role of the local Disability Services Boards may play as a mechanism for connecting and coordinating housing assistance agencies and disability interests. The Commission and work group shall also make use of existing research and presentation opportunities including the annual state housing conference to bring about the optimal statewide focus on the housing needs of people with disabilities and federal opportunities. The action plan shall be developed as part of the 2002 work priorities of both Commissions and shall be completed by December 1, 2002.